



PTO/SB/17 (07-06)

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|--|------------------|--------------------------|------------------------|
| <b>Effective on 12/08/2004.</b><br>Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).<br><b>FEE TRANSMITTAL</b><br><b>For FY 2006</b> |                  | <b>Complete if Known</b> |                        |
|  |                  | Application Number       | 10/728,836-Conf. #9261 |
|  |                  | Filing Date              | December 8, 2003       |
|  |                  | First Named Inventor     | Kushagra Vaid          |
|  |                  | Examiner Name            | E. Mehrmanesh          |
| <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27   | Art Unit         | 2113                     |                        |
| <b>TOTAL AMOUNT OF PAYMENT</b>   | <b>(\$)</b> 0.00 | Attorney Docket No.      | 42339-192083           |

|  |   |
|--|---|
| <b>METHOD OF PAYMENT</b> (check all that apply)  |   |
| <input type="checkbox"/> Check   | <input type="checkbox"/> Credit Card  |
| <input type="checkbox"/> Money Order   | <input type="checkbox"/> None   |
| <input type="checkbox"/> Other (please identify): _____  |   |
| <input checked="" type="checkbox"/> Deposit Account  | Deposit Account Number: <u>22-0261</u> Deposit Account Name: <u>Venable LLP</u>   |
| For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)                 |   |
| <input type="checkbox"/> Charge fee(s) indicated below   | <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee |
| <input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 | <input checked="" type="checkbox"/> Credit any overpayments                       |

|   |                     |   |                                |                              |                                  |                              |                              |
|---|---------------------|---|--------------------------------|------------------------------|----------------------------------|------------------------------|------------------------------|
| <b>FEE CALCULATION</b>  |                     |   |                                |                              |                                  |                              |                              |
| <b>1. BASIC FILING, SEARCH, AND EXAMINATION FEES</b>  |                     |   |                                |                              |                                  |                              |                              |
| <b>Application Type</b>   | <b>FILING FEES</b>  |   | <b>SEARCH FEES</b>             |                              | <b>EXAMINATION FEES</b>          |                              | <b>Fees Paid (\$)</b>        |
|   | <b>Fee (\$)</b>     | <b>Small Entity Fee (\$)</b>                            | <b>Fee (\$)</b>                | <b>Small Entity Fee (\$)</b> | <b>Fee (\$)</b>                  | <b>Small Entity Fee (\$)</b> |                              |
| Utility   | 300                 | 150   | 500                            | 250                          | 200                              | 100                          |                              |
| Design  | 200                 | 100   | 100                            | 50                           | 130                              | 65                           |                              |
| Plant   | 200                 | 100   | 300                            | 150                          | 160                              | 80                           |                              |
| Reissue   | 300                 | 150   | 500                            | 250                          | 600                              | 300                          |                              |
| Provisional   | 200                 | 100   | 0                              | 0                            | 0                                | 0                            |                              |
| <b>2. EXCESS CLAIM FEES</b>   |                     |   |                                |                              |                                  |                              |                              |
| <b>Fee Description</b>  |                     |   |                                |                              |                                  | <b>Fee (\$)</b>              | <b>Small Entity Fee (\$)</b> |
| Each claim over 20 (including Reissues)   |                     |   |                                |                              |                                  | 50                           | 25                           |
| Each independent claim over 3 (including Reissues)  |                     |   |                                |                              |                                  | 200                          | 100                          |
| Multiple dependent claims   |                     |   |                                |                              |                                  | 360                          | 180                          |
| <b>Total Claims</b>   |                     | <b>Extra Claims</b>                                     | <b>Fee (\$)</b>                | <b>Fee Paid (\$)</b>         | <b>Multiple Dependent Claims</b> |                              |                              |
| 25  |                     | - 27 =  | x                              | =                            | <b>Fee (\$)</b>                  | <b>Fee Paid (\$)</b>         |                              |
| HP = highest number of total claims paid for, if greater than 20.   |                     |   |                                |                              |                                  |                              |                              |
| <b>Indep. Claims</b>  |                     | <b>Extra Claims</b>                                     | <b>Fee (\$)</b>                | <b>Fee Paid (\$)</b>         |                                  |                              |                              |
| 4   |                     | - 4 =   | x                              | =                            |                                  |                              |                              |
| HP = highest number of independent claims paid for, if greater than 3.  |                     |   |                                |                              |                                  |                              |                              |
| <b>3. APPLICATION SIZE FEE</b>  |                     |   |                                |                              |                                  |                              |                              |
| If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). |                     |   |                                |                              |                                  |                              |                              |
| <b>Total Sheets</b>   | <b>Extra Sheets</b> | <b>Number of each additional 50 or fraction thereof</b> |                                | <b>Fee (\$)</b>              | <b>Fee Paid (\$)</b>             |                              |                              |
| _____   | - 100 =             | /50   | (round up to a whole number) x | =                            |                                  |                              |                              |
| <b>4. OTHER FEE(S)</b>  |                     |   |                                |                              |                                  |                              |                              |
| Non-English Specification, \$130 fee (no small entity discount)   |                     |   |                                |                              |                                  | <b>Fees Paid (\$)</b>        |                              |
| Other (e.g., late filing surcharge): _____  |                     |   |                                |                              |                                  |                              |                              |

|                     |                    |                                   |              |
|---------------------|--------------------|-----------------------------------|--------------|
| <b>SUBMITTED BY</b> |                    |                                   |              |
| Signature           |                    | Registration No. (Attorney/Agent) | 53,825       |
| Name (Print/Type)   | Marina V. Zalevsky | Telephone                         | 202-344-4000 |
|                     |                    | Date                              | 11-28-06     |

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